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Bib Data Sheet

SERIAL NUMBER 09/610,640	FILING DATE 07/05/2000 RULE _	CLASS 118	GROUP ART UNIT 1763	ATTORNEY DOCKET NO. 43889-951
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APPLICANTS

Koji Eriguchi, Osaka, JAPAN;
Takayuki Yamada, Osaka, JAPAN;
Masanori Okuyama, Osaka, JAPAN;

**** CONTINUING DATA *******

THIS APPLICATION IS A DIV OF 08/965,892 11/07/1997 PAT 6,113,733

**** FOREIGN APPLICATIONS *******

JAPAN 8-296592 11/08/1996
JAPAN 8-350612 12/27/1996
JAPAN 9-015382 01/29/1997
JAPAN 9-189841 07/15/1997

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 09/07/2000 _

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 29	TOTAL CLAIMS 103	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____	Initials _____		

ADDRESS

McDermott Will & Emery
600 13th Street N W
Washington ,DC 20005-3096

TITLE

Apparatus and method for optical evaluation, apparatus and method for manufacturing semiconductor device, method of controlling apparatus for manufacturing semiconductor device, and semiconductor device

FILING FEE RECEIVED 2496	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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		<input type="checkbox"/> 1.18 Fees (Issue)
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BIBDATASHEET

CONFIRMATION NO. 5513

Bib Data Sheet

SERIAL NUMBER 09/610,640	FILING DATE 07/05/2000 RULE	CLASS 438	GROUP ART UNIT 2825	ATTORNEY DOCKET NO. 43889-951
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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 08/965,892 11/07/1997 PAT 6,113,733

CME

** FOREIGN APPLICATIONS *****

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CME

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/07/2000

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 29	TOTAL CLAIMS 103	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>CME</i>	INITIALS		
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FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)